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## BIB DATA SHEET

CONFIRMATION NO. 2517

<b>SERIAL NUMBER</b> 10/517,423	<b>FILING or 371(c) DATE</b> 03/10/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1611	<b>ATTORNEY DOCKET NO.</b> 122005		
<b>APPLICANTS</b> Albert Duranton, Maisons-Laffitte, FRANCE; Lionel Breton, Versailles, FRANCE; <i>JSB</i>						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR03/01919 06/23/2003						
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 02/07763 06/21/2002 FRANCE 02/07764 06/21/2002 FRANCE 02/07765 06/21/2002						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/22/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/JOSEPH S KUDLA/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 43	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> OLIFF & BERRIDGE, PLC P.O. BOX 320850 ALEXANDRIA, VA 22320-4850 UNITED STATES						
<b>TITLE</b> Use of taurine for treating alopecia						
<b>FILING FEE RECEIVED</b> 3080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		